

REPORT NO.	PAGE OF	ACCIDENT DATE	ACCIDENT TIME	REPORT TYPE	RESEARCH	LOCAL CASE NUMBER	LOCAL CODES	PHOTOS ?																		
09114177	Case 12	02/01/91	10:00:00	03:25:20	5	00550676	00	NO 9 YES																		
INVESTIGATING OFFICER ID		10 AGENCY AND AREA	11 SUPERVISING OFFICER ID	12 REVIEWER ID #	13 CODE - AND - NAME OF MUNICIPALITY	14 COUNTY																				
TPRC. WARNER 3299 M.S.P. 553		CPL 1041		7245	00	00	07																			
RD CHAR	RTE NUM Accident Occurred On	17 ROAD NAME	18 IN LANE	19 TRAF SIG	20 ON RAMP	21 Ramp Number (Direction)	22 0-Not Ramp	23																		
02	000213	AUGUSTINE HERMAN Hwy	S	NO 20 YES	NO 21 YES	1 N-W 5 S-E	2 W-N 6 E-S	3 E-N 7 W-S 8 S-W 9 Other																		
RD COND	INT-RTE	25 INTERSECTING ROAD NAME or Log Mile Reference Manual description.	26 MILEPT	27 DIR	28	29 Dist. of Accr INT-RTE/Ref. & Dir.	30 FT	31 MI																		
RD DIV	ACCIDENT DIAGRAM	30 Show & Label: Roads, Traffic Units, the Travel Direction consistent with the Log Mile Reference Manual, and Movement of Traffic Units.	31 NORTH:	32	33 DESCRIBE ACCIDENT briefly: identify units by numbers. Also identify the following a) the OBJECT DAMAGED & NATURE OF DAMAGE (Property other than vehicles) and b) the NAME & ADDRESS of OWNER when applicable.																					
SRV COND	01																									
CM ZONE	ZONE 35																									
JUNCTN	01																									
EVENT-1	01																									
EVENT-2	00																									
FIX(OBJ)	00																									
COLL. TY	02																									
LIGHT	04																									
WEATHER	03																									
UNIT #	43	NAME (First, Middle, Last)	44	SEX	45	NAME (First, Middle, Last)	44	SEX																		
01	BARBARA ARLENE DUNN	02	02	02	02	DONALD LLOYD TEMPER	01	01																		
TYPE OF UNIT	46	ADDRESS (No., Street, City, State, Zip)	47	TEL	48	ADDRESS (No., Street, City, State, Zip)	47	TEL																		
DRIVER	"PED"	24 STINNEY RUN	48	Work	Res	87 PARKSIDE DR.	49	Work																		
		ELKTON, MD, 21921	49	410-398-2576		GARLIVILLE, MD, 21919	50	410-275-1226																		
MOVEMENT	CONDITN	SUBST	TEST	RESULT	FOR PEDS ONLY	AGE	TYPE	LOCATN	OBEY	VISIBL	MOVEMENT	CONDITN	SUBST	TEST	RESULT	FOR PEDS ONLY	AGE	TYPE	LOCATN	OBEY	VISIBL					
01	02	1	P <sup>2</sup>	03	03	01 <sup>3</sup>	00	00	00	00	01	02	1	P <sup>2</sup>	02	02	01	00	00	00	00					
SPEED LIMIT	SAF. EQU	EQ PROB	EJECT	CITATION NUMBER (S)							64	FAULT	SAF. EQU	EQ PROB	EJECT	CITATION NUMBER (S)						64	FAULT			
50	13	01	01	PENDING							50	13	01	P <sup>2</sup>	01	PENDING						50	13			
GOING	DRIVER'S LICENSE NUMBER										65	STATE	CLASS									65	STATE			
01	0-500-081-071-790										66	02	02	02	02	02	02	02	02	02	02	02				
CONTINU	DR DATE OF BIRTH	71	IRREGULAR CONDITION	72	HM SPILL	73	HAZ MAT NUMBER	74	CONTINU	DR DATE OF BIRTH	71	IRREGULAR CONDITION	72	HM SPILL	73	HAZ MAT NUMBER	74	CONTINU	DR DATE OF BIRTH	71	IRREGULAR CONDITION	72	HM SPILL	73	HAZ MAT NUMBER	
01	10/14/52		PARKED	01	01	01	00	00	02	11/13/59		PARKED	01	01	01	00	00	02	11/13/59		PARKED	01	01	01	00	
BODY TY	COMMER. VEHICLE ONLY	U. S. DOT NUMBER	00	76	ICC NUMBER	00	BODY TY	CDL NO	79	BODY TY	00	76	ICC NUMBER	00	76	BODY TY	CDL NO	79	BODY TY	00	76	ICC NUMBER	00	76		
MOST HE	OWNER OR CARRIER NAME (Write "SAME" if Driver)									MOST HE	OWNER OR CARRIER NAME (Write "SAME" if Driver)															
01	NUCAR CONNECTION	1-800-48-NUCAR								01	SAME															
CONTRIB CIRCUM-STANCES	OWNER / CARRIER ADDRESS									CONTRIB CIRCUM-STANCES	OWNER / CARRIER ADDRESS															
07	114 N DUPONT Hwy									07	SAME															
21	NEW CASTLE, DE 19720									21	SAME															
82-2	YEAR & MAKE OF VEHICLE	83	MODEL	84	1st IMPACT PT.	87	85	86	87	82-2	YEAR & MAKE OF VEHICLE	83	MODEL	84	85	86	87	88	89	82-2	YEAR & MAKE OF VEHICLE	83	MODEL	84	85	
21	00 CHEVY		CAMARO		00	63	00	05	05	21	96	TOYOTA		TACONA		00	02	02	02	21	96	TOYOTA		TACONA		00
82-3	EXP YR & REGISTR # STATE		AREAS DAMAGED							82-3	EXP YR & REGISTR # STATE		AREAS DAMAGED							82-3	EXP YR & REGISTR # STATE		AREAS DAMAGED			
61	00 01/883	M	04 05 08							61	00 01/883	M	04 05 08						61	00 01/883	M	04 05 08				
82-4	VEHICLE ID NUMBER									82-4	VEHICLE ID NUMBER									82-4	VEHICLE ID NUMBER					
00	ZG1F8ACK7WZ100361									00	471WMT2NXT221836								00	471WMT2NXT221836						
DAM EXT	VEHICLE REMOVED BY									DAM EXT	VEHICLE REMOVED BY									DAM EXT	VEHICLE REMOVED BY					
05	CARPENTERS									05	TOW LOT	04	CARPENTERS							05	TOW LOT					
TRAFFIC UNIT #	SEATING POSITION	CODE all injured & uninjured PASSENGERS below. Use "W" for witness in TRAF UNIT and SEAT columns. WRITE NAME & ADDRESS of Injured Passengers and Witnesses.												Wtness telephone #.	SEX	AGE	SAFETY EQUIP	EQUIP PROB.	INJUR SEVER	EJECTION UN						
01	03	NANCY J. WHALEN	320 MIDDLEDOCK AVE	TRENTON, NJ., 08610	99	02	04	13	01	04	01	02	04	01	04	01	02	04	01	02	04	01	02	04		
E UNIT	INJURED TAKEN BY:									E UNIT	INJURED TAKEN BY:									E UNIT	INJURED TAKEN BY:					
M	A	TROOPER 1	108	SHOCK TRAUMA	109	EMS RUN REPORT #	6429105	110	E UNIT	M	INJURED TAKEN BY:									E UNIT	INJURED TAKEN BY:					
S	A								S	B	SHOCK TRAUMA	109	EMS RUN REPORT #	6429100	110					S	B	SHOCK TRAUMA	109	EMS RUN REPORT #	6429100	

**Date and Time:** July 4, 2000, 0030 hrs.

**Local Case Number:** 00-55-08646

**MAARS Report Number:** 09114177

**Location:** Augustine Herman Highway (MD Rte 213) N/O Court House Point Road (CO Rd 289), Chesapeake City, MD. 21915, Cecil County

**Investigating Trooper:** Tpr. C. Warner, IBM 3299

**Reconstructionist:** Tpr. J.E. DeCoursey, IBM 0837

### **SCENE IDENTIFICATION**

The collision occurred on 07/04/00 at approx. 0030 hrs. Weather conditions were clear/cloudy (01) at the time of the collision; lighting conditions at the time of the collision were consistent with the hours of darkness without the illumination of street lighting (04). The collision occurred in the S/B Lane of Augustine Herman Highway (MD Rte 213) approx. .25-mile N/O Court House Point Road (CO Rd 289), south of Chesapeake City, MD. 21915 in Cecil County. Augustine Herman Highway (MD Rte 213) is a two-lane, non-divided highway featuring improved asphalt shoulders (01).

#### **Augustine Herman Highway (MD Rte 213):**

**Number of Lanes:** 2 **Direction:** North and South **Surface:** Asphalt.

**Shoulders:** Asphalt approx. 8 feet in width.

#### **Lane markings:**

1) Solid white edge line separating asphalt shoulders and north and southbound travel portion of the roadway,

2) Dotted/broken yellow lines separating north and southbound lanes,

**Traffic Control Devices:** None.

**Any defects on the roadway or roadway construction:** None.

**Posted Speed Limit:** 50 mph.

### **INJURED**

#### **Injured Number 1:**

**Name:** Barbara Arlene Dunn

**Date of Birth:** 10/14/52

**Address:** 24 Sandy Run, Elkton, MD., 21921

**Sex/Race:** Female/White

**Driver's License Number/Soundex:** D-500-081-071-790

**License State:** MD

**License Class:** C

**License Status:** Valid

**License Issuance:** 02/27/98

**License Expiration:** 10/14/02

**Known Injuries:** Extremity injuries; Injured, not incapacitated (03).

**Condition:** Had Been Drinking (02).

**Substance Detected:** Alcohol Present (11).

**Test Administered:** Evidence Test Given (03).

**Transported by:** MSP Trooper 1

**Transported to:** University of Maryland Shock Trauma Center, Baltimore, MD.

**EMS Run Report No.:** 6929105

**Safety Equipment Used:** Air Bag and Belts (32)

**If available, was it used correctly?** Yes

**Location/Seating Position:** Vehicle No. 1; Driver (01)

**Injured Number 2:**

**Name:** Nancy Jean Whalen

**Date of Birth:** 09/30/53

**Address:** 3828 Nottingham Way, Hamilton Square, N.J.

**Sex/Race:** Female/White

**Driver's License Number/Soundex:** W3154 5771 59536

**License State:** NJ

**License Class:** D

**License Status:** Valid

**License Issuance:** 05/26/98

**License Expiration:** 05/31/02

**Known Injuries:** Chest, abdomen and lower extremity injuries;  
Disabled/incapacitated (04).

**Condition:** Had Been Drinking (02).

**Substance Detected:** Alcohol Present (11).

**Test Administered:** N/A.

**Transported by:** MSP Trooper 1

**Transported to:** University of Maryland Shock Trauma Center, Baltimore, MD.

**EMS Run Report No.:** 66929120

**Safety Equipment Used:** Air Bag and Belts (32)

**If available, was it used correctly?** Yes

**Location/Seating Position:** Vehicle No. 1; Right Front Seat Passenger (03)

**DRIVERS**

**Driver Number 1:**

Same as Injured Number 1, listed above.

**Driver Number 2:**

**Name:** Donald Lloyd Tepper

**Date of Birth:** 11/13/59

**Address:** 87 Parkside Drive, Earleville, MD., 21919

**Sex/Race:** Male/White

**Driver's License Number/Soundex:** T-160-149-525-871

**License State:** MD

**License Class:** C

**License Status:** Valid

**License Issuance:** 12/14/96

**License Expiration:** 11/13/01

**Condition:** Had Been Drinking (02).

**Substance Detected:** Alcohol Present (11).

**Test Administered:** Evidence Test Given (03).

**Safety Equipment Used:** Air Bag and Belts (32)

**If available, was it used correctly?** No

**PASSENGERS**

**Passenger Vehicle Number 1:**

Same as Injured Number 2, listed above.

**VEHICLES**

**Vehicle Number 1:**

**Year:** 2000

**Make:** Chevrolet

**Model:** Camaro Convertible Z-28

**Color:** Red with Black Top  
**Vehicle Identification Number:** 2G1FP32G9Y2100361  
**Registration:** D1883 **State:** DE **Expiration:** 12/00  
**Sticker No.** N/A **Status:** Valid  
**Registered Owner:** Nu Car Connection.  
**Address:** 174 North DuPont, New Castle, DE. 19720  
**Insurance:** Universal Underwriters  
**Policy Number:** 1880258NIE41181  
**Damage:** Overall  
**Vehicle Removed by:** Carpenters Towing  
2558 Augustine Herman Highway  
Chesapeake City, MD. 21915  
**Vehicle Removed to:** Carpenters Towing

**Vehicle Number 2:**

**Year:** 1996  
**Make:** Toyota  
**Model:** Tacoma  
**Color:** Blue  
**Vehicle Identification Number:** 4TAWM72NXTZ218636  
**Registration:** 1CY227 **State:** MD **Expiration:** 01/01  
**Sticker No.** 05136532 **Status:** Valid  
**Registered Owner:** Name: Donald Lloyd Tepper  
**Address:** 87 Parkside Drive, Earleville, MD. 21919  
**Insurance:** State Farm  
**Policy Number:** 207153W50  
**Damage:** Overall  
**Vehicle Removed by:** Carpenters Towing  
2558 Augustine Herman Highway  
Chesapeake City, MD. 21915  
**Vehicle Removed to:** Carpenters Towing

**WITNESSES**

**Witness Number 1:**

**Name:** John Joseph Deeney  
**Date of Birth:** 08/28/51  
**Address:** 107 Roland Road, Coatesville, PA. 19320  
**Telephone No.:** H: (610) 486-6424; W: (610) 486-6424